

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09991386

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	20	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	20 - minus 20 =	* -
INDEPENDENT CLAIMS	4 - minus 3 =	* 1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

4-29-05

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 18	Minus	** 20 = -
	Independent	* 5	Minus	*** 4 = 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

OR

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	740.00
X\$18=	
X84=	8 ✓
+280=	
TOTAL	824

SMALL ENTITY TYPE ☐

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$18=	
X84=	200
+280=	
TOTAL ADDIT. FEE	200

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Independent	*	Minus	***
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Independent	*	Minus	***
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: 09/991386

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	<u>201/101</u>						=	
Total Claims >20	<u>203/103</u>		-20 =		X		=	
Independent Claims >3	<u>202/102</u>	<u>5</u>	<u>4</u> 3 =	<u>1</u>	X	<u>200</u>	=	<u>200</u>
Mult. Dep Claim Present	<u>204/104</u>						=	
Surcharge	<u>205/105</u>						=	
English Translation	<u>139</u>						=	
<u>TOTAL FEE CALCULATION</u>								

Fees due upon filing the application:

Total Filing Fees Due = \$ _____

Less Filing Fees Submitted - \$ _____

BALANCE DUE = \$ 200.00


Office of Initial Patent Examination